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# The Unknown Challenges of the Bill-Only Process

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# Learning Objectives



- Identify common challenges related to the bill-only process.
- Discuss effective strategies to manage the bill-only process to help align clinical and financial information.

# The Unknown Challenges of the Bill-Only Process

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# Do You Know?!?



- How much spend is managed by supplier representatives?
- How long the cycle time is between procedure and purchase order?
- How much time staff is dedicating to the bill only process?
- How much money is spent in supplier fees?
- How accurate your documentation is compared to the bills you are paying?

# The problem I Bill-Only Procure to Pay process was manual and not standardized across Northwestern



**8+ Days**  
Turnaround from Req to PO Creation

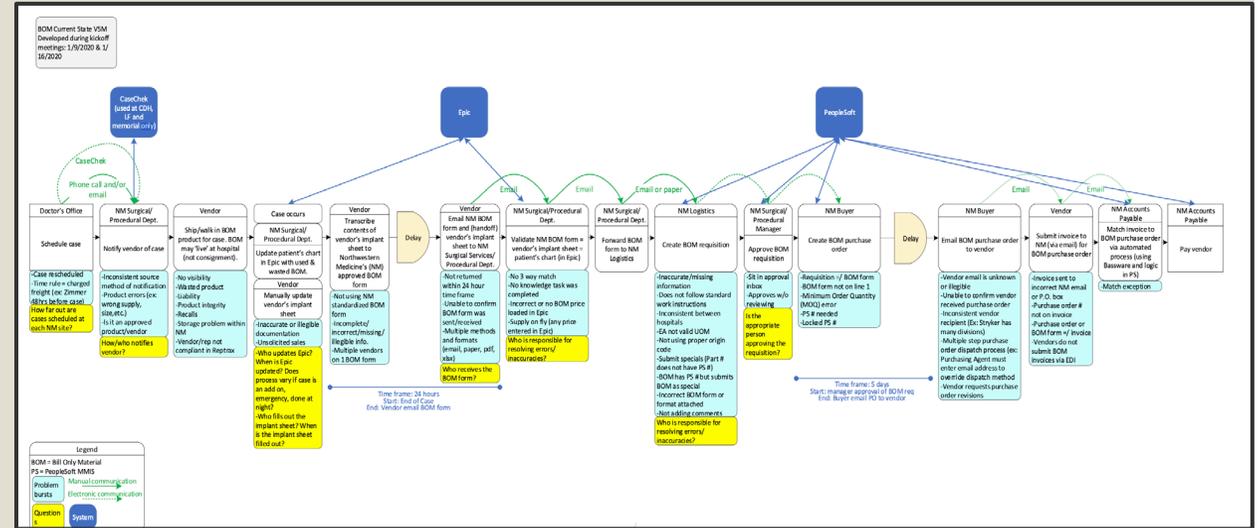
**Cycle Time**

**8 Roles**  
To Manage the Bill-Only Process

**Operating Burden**

**0**  
Automation or Single Source of Truth

**Multiple Systems**



Labor intensive touch-points resulted in:  
 Numerous Errors  
 Multiple Departments Intervening to Resolve  
 Delays

# Partnership to Build Automation



**Key Reasons:** a similar philosophy and vision of the **implant supply chain**, we chose to partner and leverage an **existing relationship**, and willing to not only build a solution for providers but **with** providers.

1

## PROBLEM 1<sup>st</sup> APPROACH

Core belief of solving root problems and never digitizing a broken process

2

## TRANSPARENCY + TRUST

Collaborate to build solutions to prevent problems

3

## VISION + EXPERTISE

Proven ability to drive vendor process compliance & complete P2P automation

4

## A SOURCE OF TRUTH

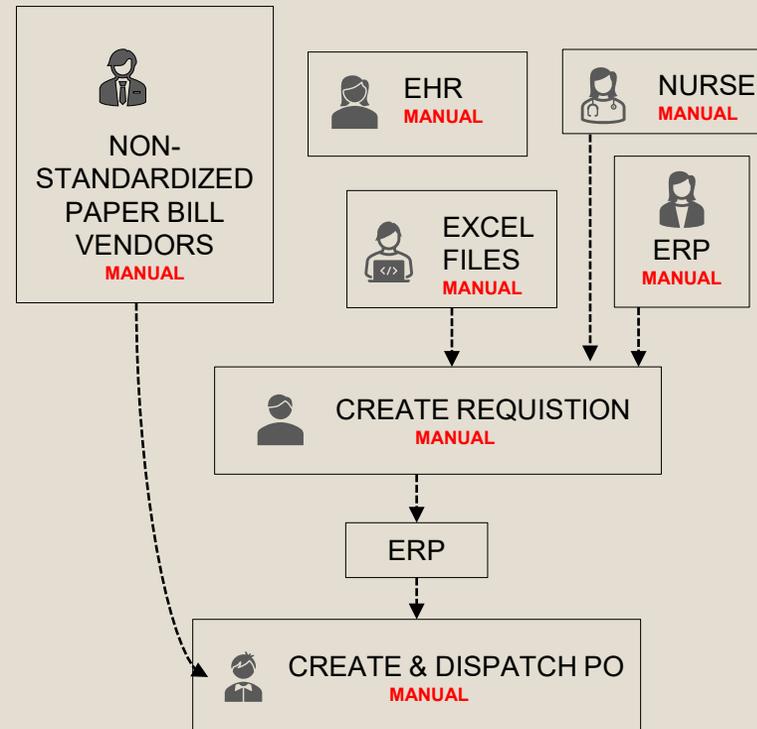
Using data as a source of truth to build sustainable processes that scale operationally and financially efficiently

# Never Digitize a Broken Process | Surface Root Cause Issues



## Manual Process Impacting up to:

1. 17,000 Hours Annually
2. Multiple Departments
3. > 3 weeks to process a PO (at times)



## Impact

8%  
Items are Misdocumented  
in Patient Record  
Post- Reconciliation

63%  
8-15 days Procedure to PO

16%  
Bad Data Discrepancies

1.25%  
Bill-Only spend on Reusable  
Items and untracked Vendor  
Fees

# Great Products Aren't Built in Isolation



## BILL-ONLY CUSTOMER RESEARCH

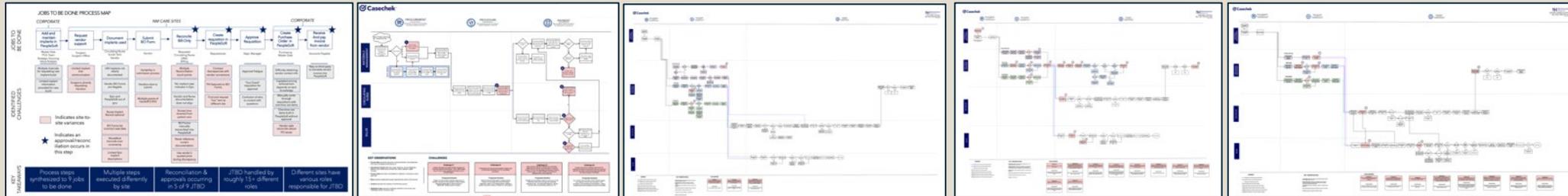
- 500+ hours of interviews with
- 100+ leaders across
- 25+ different health systems

## VENDOR SALES REP RESEARCH

- 40+ hours of interviews
- 10+ companies

**Bill-Only challenges are ubiquitous across the market**

## JOBS TO BE DONE FRAMEWORK



**NOT SCALABLE →**

**Manual Processes And Controls**

**Siloed Users, Data & Systems**

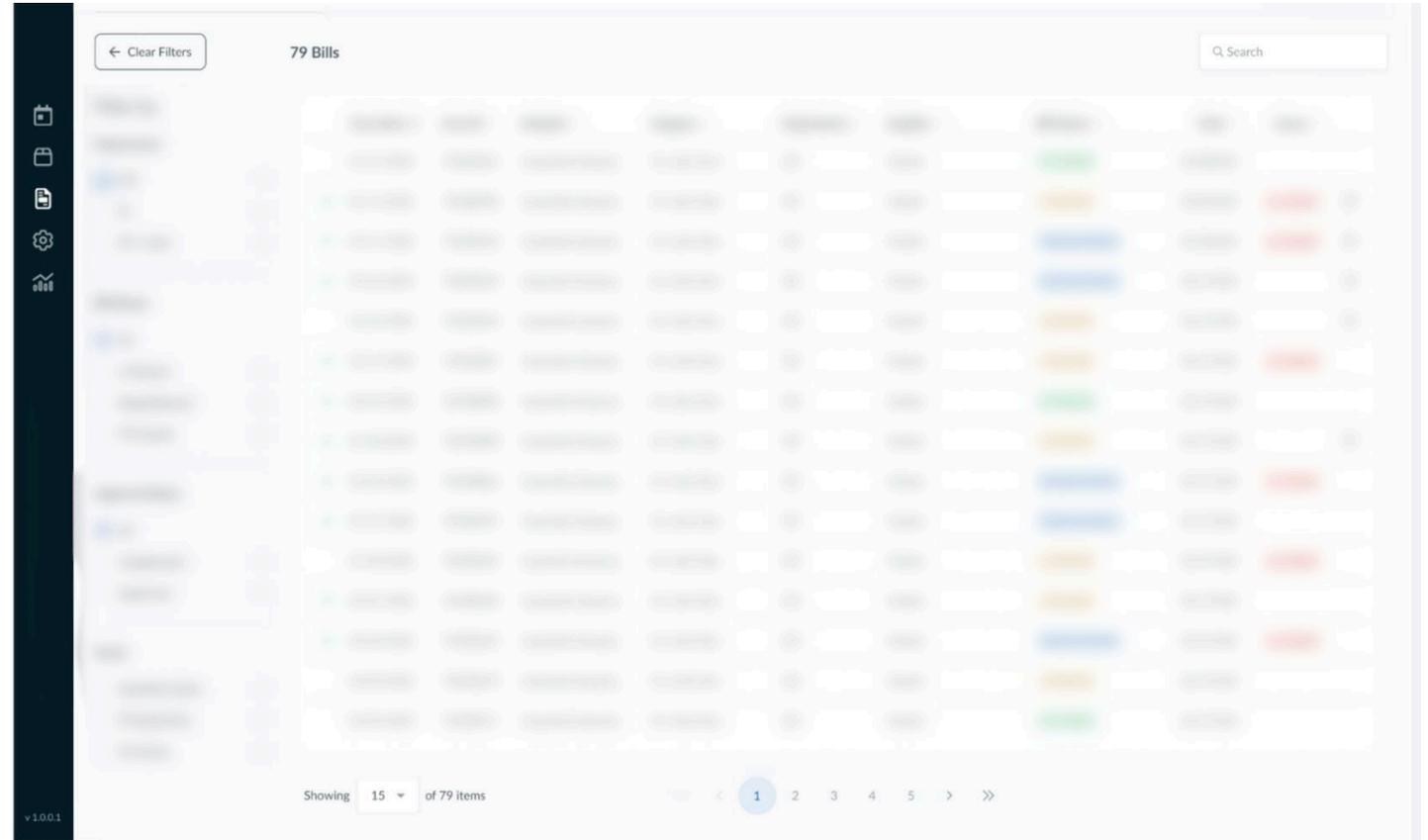
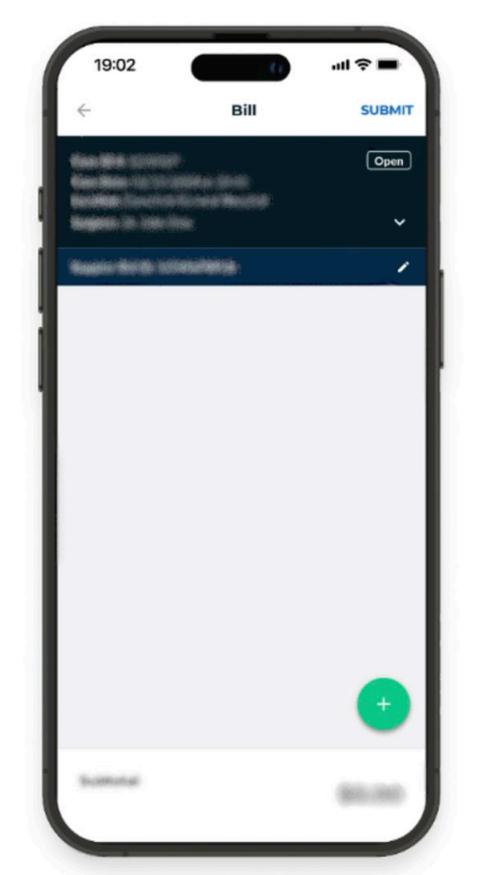
**Rep Managed Entirely Reactive**

**No Feedback Loop No Automation**

Source: Casechek, Accessed: 2023

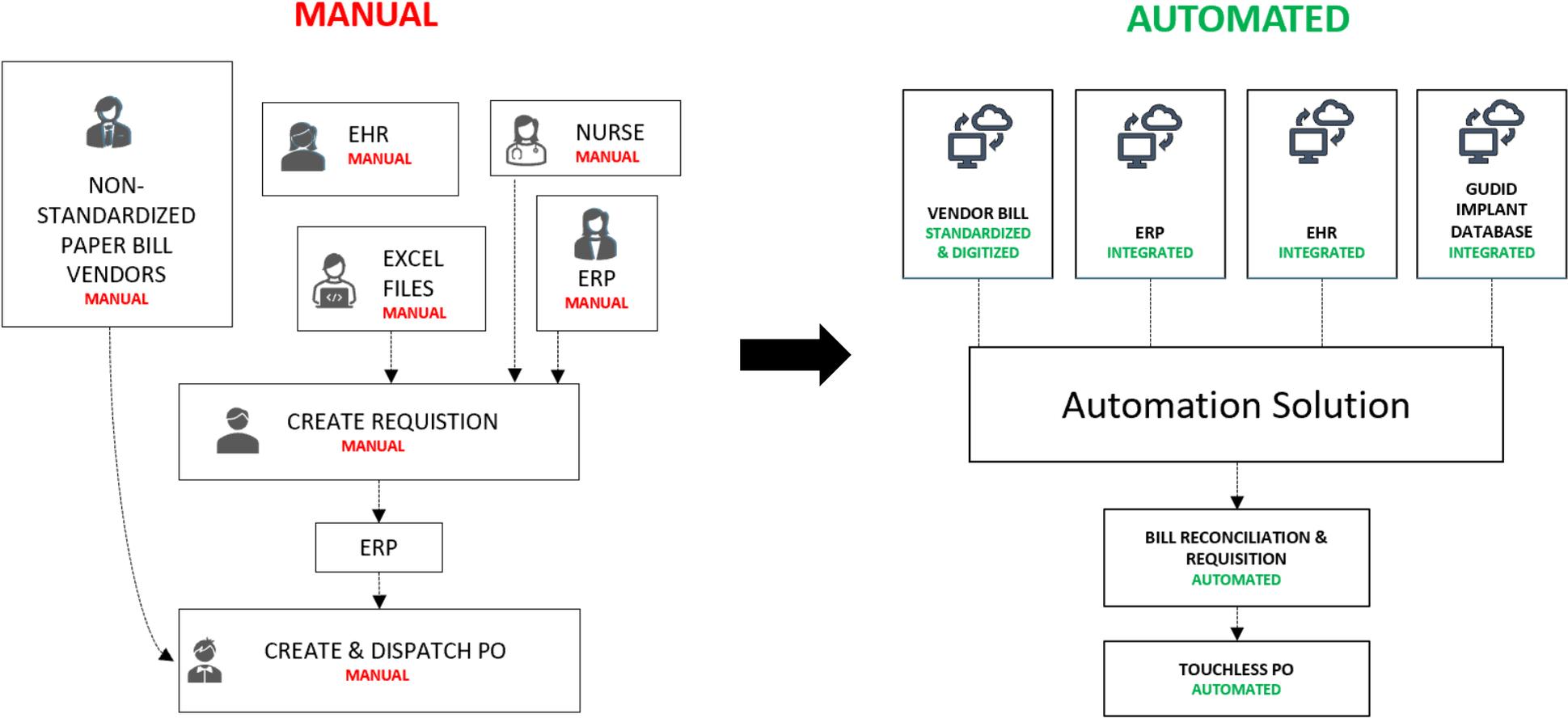
# Data-rich Bill-Only Platform

Integrates clinical, financial, and vendor data for a seamless and accurate Bill-Only process



Source: Casechek, Accessed August 2025.

# Bill Only Manual vs Automation



# Project Impact: Bill-Only Automation



	2021 Pre-Automation	2024 Post-Automation	IMPACT
<b>Process Optimization</b> <i>POs taking longer than 7 days</i>	63%	38%	40% Reduction
<b>Spend not in EHR</b> <i>% spend misdocumented</i>	8%	3%	62% Reduction
<b>Automation</b> <i>POs requiring manual intervention</i>	100%	52%	48% Reduction
<b>Fee Reduction</b> <i>% spend on supplier fees</i>	1.25%	0.61%	51% Reduction

# Lessons Learned

- Spend the time to dig through the data – build a solid baseline so you can measure your successes and continue to utilize the data to identify improvement opportunities.
- Take control back and put some responsibility back on you supplier partners – it is a privilege to support your organization, use the data to help build better a future state together.
- How much suppliers charge in fees – a lot of waste resides in these fees and get no reimbursement – find ways to reduce or remove!

# Key Takeaways



- Total Quality Management
  - Ensure you fully understand the process and gaps within your current workflow...otherwise you will just digitize a broken process and build based off assumptions.
- Deep Data Analysis
  - Take the opportunity to compare and connect records in your EHR, ERP, Contracts to Item Master, etc. to identify the full scope of the problem and potential “Unk-Unks” which will build a true P to P solution.
- Align Stakeholders
  - This problem touches multiple stakeholders, many that may not be involved in the process today like Revenue Integrity and Finance. Adoption and compliance is easier when they feel like they are part of the solution and not part of the problem.

# Questions?



## Contact:

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